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Hazardous Materials
Group Factual Report

ATTACHMENT 49 - FEDERAL ANNUAL
MONITORING EVALUATION (FAME)
REPORT FY 2011



**State of New Jersey
Public Employees Occupational Safety and Health
(PEOSH)**

***Federal Annual Monitoring Evaluation (FAME) Report
October 1, 2010 - September 30, 2011***

**U.S. Department of Labor
Occupational Safety and Health Administration
Region II - New York**

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I. Executive Summary :

A: Summary of the report

The purpose of this report is to assess the State's progress related to enforcement activities and progress towards achieving their annual performance goals established in their Fiscal Year (FY) 2011 Annual Performance Plan. This report incorporated the findings of the 2009 Enhanced Federal Annual Monitoring Evaluation (EFAME) and 2010 FAME evaluation for the State's 23(g) program. The 2010 FAME report focused on recommendations from the 2009 EFAME and noted that PEOSH adequately addressed the items found in 2009. It is OSHA Region 2's assessment that PEOSH generally continues to improve in most areas of its State program with some exceptions.

PEOSH continues to have a significant enforcement presence in the workplace through its inspection activity. Overall, PEOSH conducted a total of 1279 inspections during FY 2011; this number is down slightly from 1330 in FY 2010. The 1279 inspections during FY 2011 included 1071 safety inspections and 208 health inspections. New Jersey Department of Labor and Workforce Development (LWD) safety enforcement staff conducted an average of 89 inspections per inspector and NJDHSS health enforcement staff conducted an average of 42 inspections per inspector during 2011.

From 2005 through 2010 there is a general downward trend in overall public sector injury and illness rates. State government nonfatal occupational injuries and illnesses decreased by 14% while rates for local government decreased by 11%. Although rates have fluctuated in recent years, in the areas that are covered in PEOSH's 5-year Strategic Plan, incidence rates have declined an average of 15% since 2005.

During FY 2011 the NJ Department of Labor and Workforce Development (LWD) has made significant progress in providing formal training to their safety enforcement staff. For a number of years, LWD travel policy prohibited its staff from traveling outside the state of New Jersey resulting in staff being prohibited from attending the OSHA Training Institute (OTI) for professional training. This policy was modified during FY 2011, allowing professional staff to travel out of state, including to the OSHA Training Institute in Arlington Heights, IL for formal training.

PEOSH also continues to excel in the realm of outreach and training. PEOSH's compliance assistance and training staff have conducted significant outreach to targeted high hazard agencies. In addition, PEOSH has been a leader in the realm of homeland security in New Jersey. PEOSH personnel continue to be key members of the emergency response community and have served in leadership roles in a number of local, State and Federal emergency response activities. This participation helps to ensure effective PEOSH integration into the emergency response community.

Federal on site monitoring of PEOSH enforcement cases identified some areas that need improvement. Although there has been marked improvement in the quality of PEOSH cases since 2009, some problems that were noted in the FY 2009 EFAME were found in the cases reviewed for the 2011 Federal Annual Monitoring Evaluation (FAME). The six recommendations made in the 2011 FAME included three repeat recommendations. Most notably, there were challenges with case file documentation and abatement timeliness.

Specifically, many cases reviewed lack *prima facie* evidence to support citations including employee exposure and hazard descriptions. These deficiencies were more prevalent in the safety cases than the health cases. It should be noted, however, that PEOSH has developed a number of tools including checklists, forms, and enhanced supervisory review that are now being utilized to foster consistent and complete case file documentation. Federal monitoring verified that supervisors are taking a more active role in developing and reviewing cases and it is expected that there will be significant improvement in this area in FY 2012.

Relating to abatement timeliness, in some cases, PEOSH is assigning excessive abatement periods to violations that, realistically, can be corrected in shorter time periods.

A follow-up review of PEOSH's whistleblower program revealed that, although there was a problem with timely completion of a few whistleblower investigations, the program generally appears to be well run.

Staffing continues to be a concern with multiple vacancies within PEOSH compliance staff and a continuing hiring freeze, though there has been an increase of three compliance staff in FY 2011 through reassignment of safety consultants. Enforcement staffing continues to be below allocated levels on the safety side with twelve safety compliance officers compared to the allocated fifteen, and on the health side with five industrial hygienists compared to the allocated seven. PEOSH, however, is making credible efforts to effectively manage staffing. Part of these efforts include increasing staffing levels for a net increase of two more safety compliance officers, and one more staff member to assist with health enforcement. These efforts will bring the total PEOSH compliance staffing level to fourteen and six respectively. In recent years, PEOSH has had to return federal funds as a result of significant staff cuts. This did not occur in FY 2011.

B: State Plan Introduction

The New Jersey's Public Employees Occupational Safety and Health (PEOSH) Plan is administered by the Public Safety and Occupational Safety and Health Division of the New Jersey Department of Labor and Workforce Development (LWD) in partnership with the Consumer Environmental Occupational Health Service (CEOHS) of the New Jersey Department of Health and Senior Services (DHSS). The State Plan has two offices: a labor (safety) central office, and a health central office, both in Trenton, New Jersey. These offices cover all public sector enforcement and consultation activities in New Jersey.

In the public sector, PEOSH covers both safety and health disciplines. PEOSH law requires the State to adopt all applicable Federal OSHA safety and health standards, either identically or as alternative standards "at least as effective as" the federal standards.

The PEOSH program does not contain provisions for the issuance of monetary penalties for public employers found not to be in compliance with applicable standards on a first instance basis, except in cases of willful violations. There is, however, a provision for sanctions (penalties) for repeat violations and per diem penalty on all failure-to-correct violations issued. PEOSH's review proceedings are similar to Federal OSHA review procedures.

This New Jersey Public Employees Occupational Safety and Health State OSHA FAME for FY 2011 provides a summary of the PEOSH enforcement and consultation activities and results

including those relating to the PEOSH Strategic Plan for FY2009 – FY2013. The strategic goals, objectives, and activities have provided the focus for PEOSH enforcement, education and training, outreach, and administrative programs. PEOSH strategic goals direct resources to the more hazardous public sector workplaces to save lives and prevent workplace injuries and illnesses.

PEOSH's FY11 Annual Performance Plan consisted of three broad-based strategic goals with complementary performance goals as follows:

Strategic Goal # 1 - The reduction of injuries, illnesses and fatalities by 1% per year from FY09 through FY13 totaling 5% for the 5-year Strategic Plan in the following industries:

- **State agencies for Transportation Support Services (NAICS 488).**
- **State Nursing and Residential Care Facilities (NAICS 623)**
- **Local Fire Protection (NAICS 92216).**
- **Local Police Protection (NAICS 92218).**

PEOSH did not meet its goal to reduce non-fatal injuries and illnesses 2% (1% for each of calendar years 2009 and 2010 for which there is injury and illness data) in the following sectors:

- Transportation Support Services (29% increase over 2008 baseline);
- Local Fire Protection (9.4% increase over 2008 baseline)

PEOSH met or exceeded its goal to reduce injuries and illnesses by 2% (1% for each of calendar years 2009 and 2010 for which there is injury and illness data) in the following sectors:

- State Nursing and Residential Care Facilities (16% decrease from 2008 baseline, exceeding the goal)
- Local Police Protection (3.5% decrease from 2008 baseline, exceeding the goal)

In addition, with some exceptions, PEOSH met or exceeded other performance indicators under the above goal for each sector relating to numbers of enforcement inspections, consultation visits, and outreach and training. PEOSH plans to continue enhanced enforcement and outreach for the Transportation Support Services and Fire Protection sectors in an effort to foster improvement in those sectors.

Strategic Goal #2 - Promoting public sector employer and worker awareness of, commitment to, and participation in workplace safety and health by:

- Performance Goal 2.1: Fostering the development of effective safety and health management systems in 100% of State Agencies by offering and delivering training programs on Safety and Health Management Systems and Development of Labor-Management and Safety and Health Committees for 20% of the agencies each year for the five year strategic plan. In addition, PEOSH planned to disseminate Guidelines for

Joint Labor and Management Health Safety Committees to all New Jersey State Agencies and encourage the agencies to develop and improve Joint Labor Management Safety and Health Committees. Progress toward achieving this goal was not achieved during FY 2011 due to lack of available staff. PEOSH has requested that this goal be removed from its strategic plan due to lack of personnel. This request is currently under review by Federal OSHA and will be addressed during FY 2012.

- Performance Goal 2.2: The NJDHSS PEOSH Program was to conduct programmed Health inspections, and/or consultation visits, and/or provide outreach and training to 20% of New Jersey's 566 of municipal departments of public works by the end of FY2013 (4% or 22 per year). PEOSH conducted a total of 26 programmed inspections and 5 consultation visits at municipal departments of public works which met the goal of 22 interventions. This goal was met during FY11.
- Performance Goal 2.3: Achieve a customer service rating of "highly effective" (score 7 or higher, on a scale of 1 thru 10) on a customer satisfaction survey from 90% of public employers subject to an intervention. This goal was exceeded in FY11 in that 100% of public employers rated PEOSH as highly effective.
- Performance Goal 2.4: Achieve a customer service rating of "highly effective" (score of 7 or higher, on a scale of 1 thru 10) on a customer satisfaction survey which rates the quality of public sector compliance assistance interventions (e.g., outreach, seminars, mass mailings, hazard bulletins, newsletters, etc.) conducted/distributed by PEOSH from 90% of public employers subject to a compliance assistance intervention. This goal was exceeded in FY11 in that 100% of public employers rated PEOSH as highly effective.
- Performance Goal 2.5: Achieve employee involvement in 100% of PEOSH interventions (e.g., inspections, consultations, etc.) According to PEOSH, there was 100% employee involvement and this goal was met during FY11. All of the enforcement and consultation case files reviewed contained adequate documentation of the level of employee involvement, and employees and/or their representatives were afforded the opportunity to participate in all aspects of the interventions.
- Performance Goal 2.6: Bring 4 new public sector work sites into the Safety and Health Achievement Recognition Program (SHARP) every year for the 5 year Strategic Plan (20 new sites by 2013). No new sites were brought into SHARP during FY11. This goal was not met; however five SHARP consultations were completed in FY 2011 which are currently under review.

Strategic Goal #3: Securing public confidence through excellence in the development and delivery of PEOSH programs and services:

- Performance Goal 3.1: Initiate inspections of fatalities and catastrophes within one (1) day of notification for 95% of occurrences to prevent further injuries or deaths. All 8 (100%) of the fatality/catastrophe investigations were initiated within one workday during FY11. This goal was met.
- Performance Goal 3.2A: Initiate 95% of safety complaint inspections within five (5) working days of notification. This goal was exceeded as 100% of the 51 complaints

received were initiated within five working days of receipt during FY2011.

- Performance Goal 3.2B: Initiate 95% of non-IAQ/non-sanitation health complaint inspections within 5 working days of notification. For FY2011 NJDHSS PEOSH Program received 38 complaints. Thirty-six inspections were initiated within five days (average 3.1 days, range 2-6 days). The NJDHSS PEOSH Program received 102 IAQ and sanitation complaints in FY2011. Thirty-six of the 38 (95%) of non-IAQ/sanitation complaints were opened within five working days, meeting the goal.

New Jersey State Plan Profile

State Plan: Approved – January 11, 2001 – developmental plan

Designee - Harold J. Wirths, Commissioner
New Jersey Department of Labor and Workforce Development
Manager - Howard Black, Director
Division of Public Safety and Occupational Safety and Health

Excluded Coverage

- * Occupational Safety and Health enforcement services in the private sector
- * Occupational Safety and Health consultative services in the private sector

Employee Coverage

- 139,207 State
- 396,698 Local
- 535,905 Total State, County and Local (September 2010 data)

Operational Grant

- * FY 2011 Federal Share: \$1,984,700
- * FY 2011 State Share: \$1,984,700
- * FY 2011 100% State Funds: \$773,515
- * FY 2011 Total Grant: \$4,742,915

Allocated Staffing (Full time equivalent, FTE)

- **Total FTE: 47.42**
- Managers: 7.04
- Safety Enforcement: 15
- Health Enforcement: 7
- Safety Consultation: 1
- Health Consultation: 3
- Compliance Assistance Specialist: 1
- Trainers: 5
- Clerical: 8.38

Actual Staffing in FY 11

- **Total FTE: 32.79**
- Managers: 5.77
- Safety Enforcement: 12
- Health Enforcement: 5
- Safety Consultation: 0
- Health Consultation: 2
- Compliance Assistance Specialist: 1
- Trainers: 3
- Clerical: 5.02

Staffing

Although PEOSH staffing falls short of its allocated staffing, it has made reasonable progress toward improving its staffing situation and current indication is that this trend will continue into FY 12. PEOSH LWD currently has 12 of the 15 allocated safety compliance positions filled, an increase from 9 safety compliance positions in FY 2010, and has been authorized to hire two more safety compliance staff, bringing the total number of Safety Compliance Officers to 14. In addition, PEOSH DHSS currently has 5 of 7 Industrial Hygienist compliance positions filled and has hired an entry level Industrial Hygienist who, though not a field inspector, is responsible for administrative duties, thus freeing field inspectors for enforcement activity. DHSS is also exploring ways to better utilize existing staff from its other programs (such as Consumer and Environmental Protection programs) to include PEOSH enforcement as part of their job duties.

C: Data & Methodology

Monitoring of the New Jersey State Plan consisted of a team of Federal OSHA personnel from both the safety and the health side and from the Whistleblower 11c program. The team conducted onsite audits at PEOSH's office in Trenton starting on January 30, 2012 and ending on February 3, 2012.

The evaluation of the PEOSH Program covered Fiscal Year 2011, the period of October 1, 2010 through September 30, 2011 and included the following documents:

- State Activity Mandated Measures (SAMM) Report
- Enforcement Comparison (INSP and ENFC Reports)
- Mandated Activities Report for Consultation (MARC)

The OSHA team reviewed a total of 80 closed case files broken down by the following:

- 7 Fatality case files
- 12 Whistleblower case files
- 9 23(g) Consultation case files
- 52 Enforcement case files (35 safety and 18 health -complaints, planned, referrals)

Formal stakeholder interviews conducted during the FY 2009 EFAME process provided valuable insight into all aspects of the PEOSH program. Since OSHA conducted an extensive evaluation

of the PEOSH Discrimination Program as part of the FY 2009 EFAME study, and given that OSHA maintains a continuous dialogue, particularly during this rating period, as part of its ongoing relationship with these key stakeholders, formal interviews were not conducted during the preparation of this year's EFAME.

D: Findings & Recommendations

OSHA's significant findings and recommendations below are listed in order of decreasing significance. The first three (3) Findings and Recommendations are repeats from the FY 2009 FAME. (Detailed descriptions of these specific findings and recommendations can be found in Section IV and Appendix A.)

- Lack of Case File Documentation

The audit revealed that case files lacked *prima facie* evidence to support the specific citations issued. For example, of the 26 safety case files reviewed, 23 (88%) continued to lack crucial documentation such as employee exposure, while all 26 lacked a description of the hazard and how employees are exposed to the hazard, as well failing to specify the location of the hazard on the OSHA 1b. Very little improvement was noted during this review compared to the FY 2009 report when 100% of the safety case files lacked case file documentation as well as lacking OSHA 1b forms. The health case files showed improvement. Only 8 of the 18 case files reviewed (44%) lacked the required evidence to support the citations issued compared to 100% of the case files reviewed in FY 2009.

- Recommendation – Document case files in accordance with PEOSH's Field Operations Manual (FOM).

- Excessive abatement time periods specified for correction (Excessive Abatement Dates)

Though improved from FY 2009 when a majority of the proposed abatement dates were excessive, the audit revealed that in both the safety and health case files, abatement time periods proposed continue to be excessive. Some examples during this review included 30 days abatement for respirators being removed from service, 60 days for an exit blocked by a fire hose and 60 days for an electrical panel to be labeled.

- Recommendation – Ensure appropriate time periods are established for all abatement.

- Inadequate Abatement Documentation

Twenty percent of safety case files reviewed (7 of 35) lacked specific documentation as to how violations were corrected. Abatement documentation in the health files was adequate

- Recommendation – Ensure all case files contain all required abatement documentation.

- Complaint Processing Issue

Letters to the complainants were missing in 35% of the safety case files (7 of 20) reviewed. Documentation in the files referred to letters to complainants but no letters were in the case files.

- Recommendation – Ensure case files include all required forms and all letters or communications related to the complaint.

- Complaint Processing Timeliness Issue

The health case files that were reviewed revealed an excessive time period between receipt of the complaint to initiation of IAQ inspections (120+ days) - 6/6 IAQ Health cases; and an excessive time period between the closing conference and sending a letter to the complainant advising them of the complaint inspection findings (50+ days); 6/18 Health cases.

- Recommendation – Ensure timely response to complaints and complainants in accordance with PEOSH's Field Operations Manual (FOM).

PEOSH DHSS has implemented procedures to reduce their current backlog of IAQ and sanitation complaints.

- Forms Processing Issue

Safety case files (10 of 35) did not contain an OSHA-1 when follow-up inspections had been conducted.

- Recommendation – Ensure case files include all forms as required.

II. Major New Issues

There were no major new issues.

III. State Response to FY 2010 Recommendations

There were no outstanding issues or recommendations from the 2010 FAME Report. The FY 2010 FAME focused on completion of corrective actions resulting from recommendations in the FY 2009 FAME, and NJ completed all its corrective actions.

IV. Assessment of State Performance

PEOSH gained several safety enforcement personnel through the reassignment of safety consultants during FY 2011 and conducted a total of 1,279 inspections during the fiscal year: 1,071 safety inspections and 208 health inspections. This is approximately 1% higher than the 1,265 total inspections planned but slightly less than the 1330 inspections in FY 2010.

PEOSH's average response time to initiate complaint inspections was 84 days from notification; however this response time is skewed due to the high number of indoor air quality complaints that were received by the NJDHSS during the year. PEOSH's response to all non-Indoor Air Quality complaints averaged less than 5 days which is acceptable.

PEOSH's Indoor Air Quality standard goes beyond OSHA requirements. The Agency received 120 IAQ complaints during FY 2012 which has led to a significant backlog in IAQ complaints that are not investigated within the prescribed 120 day period. PEOSH has recently (in early FY 12) instituted the practice of handling a portion of the IAQ complaints non-formally via phone and fax rather than an initial on-site inspection. NJDHSS retains the right to inspect if an acceptable response is not received by the agency against which the complaint was filed. This practice has had the effect of driving down the average response times significantly.

PEOSH has met or exceeded the reference standard on the majority of the State Activity Mandated Measures including notifying complainants on time; response time to imminent danger complaints and referrals; number of calendar days from opening conference to citation issuance; percent of programmed inspections with serious, willful or repeat violations.

Although there was marked improvement over the documentation issues identified during the FY 2009 on site evaluation, case file documentation continues to be an area where there is room for improvement. Challenge areas include: employee exposure; adequate hazard descriptions; information on exposed employees; field interview notes; hazard locations; specified injury or illness not equating with the gravity of the violation or injury or illness specified is not based on the worst case exposure; no OSHA 1 in files (safety cases) for follow-up inspections; inadequate abatement documentation (safety cases); and letters to complainants not in the file. Training had been conducted in January 2011 to address documentation issues and although documentation has improved, additional training is recommended.

In addition to documentation, some areas relating to timeliness were identified as challenges including: excessive time period between closing conferences and letters to complainants advising them of inspection findings (50+ days); and excessive abatement dates (generally 60 days) assigned to hazards that could and should be abated much more timely. Moreover, even though some abatement dates were excessive in the case files reviewed, only 85% of serious, willful, or repeat violations were timely abated.

In addition, relating to fatality inspections, in one of three cases the next of kin letter explaining the results of the inspection was not sent; and in two of those three cases the Accident Investigation Summary (OSHA 170) form was not completed in sufficient detail.

A. Enforcement (Source: SAMM report -11/08/2011 and Appendix C – FY 2011 Enforcement Activity)

1. Complaints

Timeliness of state response and notifications to complainant:

PEOSH policy requires that complaints alleging serious violations be opened within 5 days and those alleging non-serious hazards must be opened within 120 days. (Federal OSHA requires all formal complaints to be opened within 5 work days.)

During this evaluation period, PEOSH responded to 153 complaints with an average response time of 83.58 days from notification. This is an increase from 30.14 days in FY 2010. The high number of days to respond is due to the Indoor Air Quality (IAQ)/Sanitation complaints. During this audit excessive time periods between receipt of complaint to initiation of IAQ inspections averaged 120+ days and the time period between the closing conference and sending a letter to the complainant advising them of the inspection findings was 50+ days. In an attempt to lower this number PEOSH established a policy in early 2012 to handle many of these complaints as non-formal to reduce the IAQ complaint backlog which has significantly reduced the backlog to date. (SAMM report 11-08/11 – SAMM #1)

Finding 11-01

Complaint Processing Timeliness issue:

- Excessive time period between receipt of complaint to initiation of IAQ inspections (120+ days) – 100% of the IAQ Health cases (6 of 6) reviewed;
- Excessive time period between the closing conference and sending the letter to the complainant advising them of the complaint inspection findings (50+ days) - 6 of the 18 Health case files reviewed (33%).

Recommendation 11-01 – Ensure timely response to complaints and complainants in accordance with PEOSH's Field Operations Manual (FOM).

PEOSH DHSS should continue to implement established procedures to reduce their current backlog of IAQ and sanitation complaints

100% of the complainants (153 total) were notified on time in FY 2011 of PEOSH's determination regarding their complaint. (SAMM report 11/08/11 – SAMM #3)

Finding 11-02

Complaint Processing Issue: Missing Letters

Letters to the complainants were missing in 7 of the 20 safety case files reviewed (35%). Documentation in the case files referred to letters to complainants but no letters were in the case files. This was not the case with the health complaint files reviewed.

Recommendation 11-02 – Ensure case files include all required forms and letters related to complaints.

2. Fatalities –

PEOSH recorded 7 fatalities for FY 2011 and all 7 case files were reviewed on site. Three of the 7 fatalities were determined to be work-related. Significant improvement occurred in this area during FY 2011 as all 7 fatalities had OSHA 36's in the case file compared to 0 case files containing OSHA 36's in the FY 2009 report.

In 1 of the 3 work-related fatality case files, the OSHA 170 narrative was lacking detailed information as to the cause of the fatality while another case file had no narrative in the abstract of the OSHA 170.

In 1 of the 3 work-related fatality case files, no Next-of- Kin (NOK) Final letter was sent to the family of the victim. This is an issue in only 1 case file and OSHA is not making a formal recommendation at this time. PEOSH stated that the NOK is cc'd on the letter that is sent to the employer explaining the results of the inspection. There is no documentation on the diary sheet or the actual letter as to whether this letter was sent.

Responses to all fatalities were within established timeframes.

3. Targeting and Programmed Inspections

PEOSH conducted a total of 1,279 inspections during FY 2011 – 1,071 were safety inspections and 208 were health inspections. Out of this 1,279, unprogrammed inspections included 7 accidents and 132 complaints. (Appendix C data)

PEOSH focused programmed inspection resources based on historical incidence of recordable injuries and illness cases. Under this program PEOSH conducted a total of 574 programmed inspections within the four public sector agencies targeted for enforcement interventions as follows:

- Transportation Support Services – 8 inspections
- State Nursing and Residential Care Facilities – 18 inspections
- Local Fire Protection – 394 inspections
- Local Police Protection – 154 inspections

Based on inspection results PEOSH's targeting appears to be appropriate.

Finding 11-03

Forms Processing Issue

Case files did not contain an OSHA-1 for Follow-Up inspections in 10 of the 35 Safety case files reviewed. This was not an issue with the Health files reviewed.

Recommendation 11-03 – Ensure case files include all required forms.

4. Citations and Penalties

Finding 11-04: (09-4, 09-5, 09-8, 09-10)

Lack of Case File Documentation

Most of the case files reviewed had inadequate evidence to support citations. Health case files were improved from FY 2009, but very little improvement was noted for safety case files. Case file critical information and documentation were missing from almost all safety cases (88%, or 23 of 26, vs. 100% in 2009) and 44% of health cases (vs. 100% in 2009) that are needed to establish prima facie violations of OSHA standards. A majority of the case files were lacking evidence of employee exposure and adequate information to support the citations issued. Overall, there was a lack of case file documentation and or evidence of employee interviews, or critical information and documentation were missing to establish prima facie violations of OSHA standards. It should be noted however, that the documentation of the health case files was generally better than the safety case files. Below are examples of what was lacking:

- No location specified on the OSHA1b; (7/18 Health cases); (26/26 Safety Cases)
- No violation observed or occurred “on or about date” on the OSHA 1b; (7/18 Health cases); (26/26 Safety Cases)
- No employee exposure data listed and no evidence to support employee exposure, including employee interview notes and statements: Names, Addresses, and Phone Number with the total number exposed and duration of exposure (i.e., exposed employees table) on the OSHA 1b (8/18 Health cases); (23 of 26 Safety cases)

No description of the hazard on the OSHA 1b and how employees were exposed to the specific hazard on the 1b; (6/18 Health cases); (26/26 Safety cases)

Specified injury/illness listed does not equate with the Gravity/or is not consistent with the hazard: Health injury illness utilized is not based on the worst case exposure/or otherwise in compliance with the Gravity-based calculations found within FOM; (4/18 Health cases)

- OSHA 170 was not completed in sufficient detail in 2 of the 3 fatality case files reviewed. The narrative section of the OSHA-170 was blank and/or lacked detail as to a cause of the fatality.

In discussions with OSHA, PEOSH acknowledged that the level of documentation detail in their case files is not at the same level as federal OSHA. PEOSH states that this has not been a significant issue in achieving compliance by Public Sector employers and that this is evidenced by PEOSH's low rate of contested cases. (In FY 2011 only three contested cases went through the post contest process. Two of the three cases were settled post contest and one may go forward to the Review Commission for litigation.) PEOSH attributes this to the State's processes and requirements for adjudicating contested citation items through the State's Review Commission as well as being partly attributable to the lack of financial sanctions for first instance violations.

Recommendation 11-04 – Document case files in accordance with PEOSH's Field Operations Manual (FOM).

Violation Classification

In FY 2011, out of 1,279 inspections, 66% (2,535) of violations were classified as serious, compared to 78% in FY 2010 and 44% for all state plans. PEOSH also issued citations for 1 repeat violation, no willful or Failure to Abate violations and 1,300 other-than-serious violations. In regards to the average number of violations per inspection PEOSH issued 6.1 violations per initial inspection which is an increase from FY 2010 total of 4.4 and is above the state plan total of 3.4 and federal OSHA total of 2.9 violations per inspection. (Appendix C)

The percent of inspections with serious/willful/repeat (S/W/R) violations is higher when looking only at the 574 programmed inspections: 83% of programmed safety inspections and 80% of programmed health inspections had S/W/R violations, both well above the national averages of 59% (S) and 52% (H) (SAMM 8).

PEOSH was double the national average for average violations per inspection with violations. PEOSH cited 4.14 S/W/R violations and 2.12 "other than serious" violations per inspection, compared to the national averages of 2.1 for S/W/R and 1.2 for "other than serious". (SAMM 9)

Penalties

Total penalties issued for FY 2011 were \$300.00 for the 1 repeat violation. This number is much smaller than FY 2010 when total penalties assessed were \$38,985. The difference in the amounts is due to 3 citations for Failure to Abate (FTA) violations issued in FY 2010 compared to 0 FTA's issued in FY 2011. PEOSH also did not issue any citations for willful violations; however, NJ will issue first instance sanctions for willful violations. Where penalties were assessed, the penalty was found to be appropriate. (Appendix C)

5. Abatement

Finding 11-05 (09-11)

Excessive Abatement Periods

Abatement periods established for correction of violations were found to be excessive in 37% (19 of 52) of the cases reviewed. This occurred in 5 of the 18 Health case files reviewed and 14 of the 35 Safety case files reviewed. It was frequently found that 60-day abatement periods were assigned for violations that should be able to be abated within one to two business days. This could be a reason for the lack of FTA's issued in FY 2011. Some examples of excessive abatement periods during this review included 30 days abatement for respirators being removed from service, 60 days for an exit blocked by a fire hose and 60 days for an electrical panel to be labeled. It should be noted that PEOSH conducts follow up inspections regardless of whether acceptable abatement certification is received from employers.

Recommendation 11-05 – Ensure appropriate time periods are established for all abatement.

Even with excessive abatement periods in a number of cases, the percentage of serious, willful, and repeat violations cited in FY 2011 that was verified as abated within the abatement date plus 30 days was 85% instead of 100% (2,269 SWR out of 2,670). (SAMM 6)

Finding 11-6: (09-11)

Abatement Documentation

Additionally, inadequate documentation (no specifics given) on how violations were abated was noted in 20% of safety cases (7 of 35). Abatement documentation in the health case files was adequate.

Recommendation 11-06: Ensure case files include all required forms on abatement documentation.

6. Employee and Union Involvement

No findings or issues were found in the 2011 FAME audit regarding employees and union involvement in all aspects of the inspection process. Cases reviewed all indicated that appropriate notifications were delivered to employees and their union representatives and that all were afforded an opportunity to participate in the inspection process.

B. Review Procedures

Under PEOSH's state plan, employers, employees and other affected parties may seek informal review with the Department of Labor relative to a Notice of Violation/Order to Comply, the reasonableness of the abatement period, and penalties(if any). The parties noted above may seek formal administrative review with the New Jersey Occupational Safety and Health Review

Commission, a board appointed by the Governor and authorized under section 34:6A.42 of the New Jersey Public Employees' Occupational Safety and Health Act to hear and rule on appeals of orders to comply and any penalties proposed. Any employer, employee or employee representative affected by a determination of the Commissioner may file a contest within fifteen (15) working days of the issuance of an Order to Comply. The Review Commission will issue an order, based on a finding of fact, affirming, modifying, or vacating the commissioner's Order to Comply or the proposed penalty, or directing other appropriate relief, and the order becomes final 45 days after its issuance. Judicial review of the decision of the Review Commission may be sought at the Appellate Division of the Superior Court.

1. Informal Conferences

PEOSH has no first instance sanctions and therefore conducts very few informal conferences. During FY 2011 PEOSH held four informal conferences. One of the cases settled at the informal conference level and three were contested.

2. Formal Review of Citations

The three contested cases noted above went through the post contest process. Two of the three cases were settled post contest and one may go forward to the Review Commission for litigation.

Contested cases were not logged into the IMIS database, so no data was available on average lapse time from receipt of contest to first level decision (SAMB 12). Once the new OSHA Information System (OIS) is rolled out, PEOSH anticipates being able to log the information needed to evaluate this measure.

C. Standards and Federal Program Changes Adoption

1. Standards Adoption:

A total of two (2) Federal Standards were issued during FY 2011; all were submitted for adoption. The notice of intent to adopt was timely for both standards.

STANDARDS ADOPTION For period covering: October 2010 – September 2011 Region: II State: New Jersey (PEOSH)

Instruction/Notice Number and Subject	Date State E- mailed Response	Intent to Adopt (Y/N)	Adopt Identical (Y/N)	State Adoption Status Change	Adoption Date
Standard Log 1910.1915 (5/03/11) Working Conditions in Shipyards Due – 7/02/11 Adoption Req. – Yes Intent Req. – Yes	5/10/11	Y	Y		8/29/11 43 N.J.R. 2625(a)

Instruction/Notice Number and Subject	Date State E- mailed Response	Intent to Adopt (Y/N)	Adopt Identical (Y/N)	State Adoption Status Change	Adoption Date
Standard Log 1910 – 15,18,19,26,28 Standards Improvement Project Phase III 6/17/11 Due – 8/16/11 Adoption Req. –Yes Intent Req. - Yes	6/17/11	Y	Y		8/01/11 43 N.J.R. 1906B

2. Federal Program/State Initiated Changes

During FY 2011, a total of eleven (11) Federal Program Changes were issued. A timely response was received for 8 of the 11. OSHA and PEOSH are working cooperatively to improve timeliness in this area.

FEDERAL PROGRAM CHANGE LOG For period covering: October 2010 – September 2011 Region: II State: New Jersey (PEOSH)

Instruction/Notice Number and Subject	Date State E- mailed Response	Intent to Adopt (Y/N)	Adopt Identical (Y/N)	State Adoption Status Change	Adoption Date
CPL-02-01-049 PPE in Shipyard Employment (11/4/10) Due -1/11/11 Adoption Req. – No Intent Req. – Yes	8/12/11	Y			
STD-03-11-002 Compliance Guidance for Residential Construction (12/16/10) Due- 2/26/11 Adoption Req.-No Intent Req. - Yes	2/14/11	Y	Y	N	6/01/11
CPL-03(11-01) NEP Microwave Popcorn	8/12/11	N	N/A	N/A	No popcorn processing sites under

Instruction/Notice Number and Subject	Date State E- mailed Response	Intent to Adopt (Y/N)	Adopt Identical (Y/N)	State Adoption Status Change	Adoption Date
Processing Plants (1/18/11) Due-4/16/11 Adoption Req.-Yes Intent Req. - Yes					PEOSH jurisdiction
CPL-02-01-050 PPE in General Industry (2/10/11) Due – 4/16/11 Adoption Req.-No Intent Req. - Yes	6/08/11	Y	Y	N	
CPL-03-00-013 NEP Primary Metal Industries (5/19/11) Due-8/01/11 Adoption Req.- Yes Intent Req. - yes	8/12/11	N	N/A	N/A	No Primary Metal Industries under PEOSH jurisdiction
CPL-02-00-150 Revisions to FOM (4/22/11) Due – 7/02/11 Adoption Req. – Yes Intent Req. - Yes	5/10/11	Y	Y	N	3/8/12
CPL-02-01-051 Confined & Enclosed Spaces & Other Dangerous Atmospheres in Shipyard Employment (5/20/11) Due – 7/24/11 Adoption Req. – No Intent Req. - Yes	8/12/11	Y	Y		
CPL-02-00-151 Subpart T – Commercial Diving (6/13/11) Due – 8/16/11 Adoption Req. - No Intent Req. – Yes					
CPL 02-01-052					

Instruction/Notice Number and Subject	Date State E- mailed Response	Intent to Adopt (Y/N)	Adopt Identical (Y/N)	State Adoption Status Change	Adoption Date
Enforcement Procedures for Investigating /Inspecting WPV Incidents (9/8/11) Due – 11/12/11 Adoption Req. – No Intent Req. - Yes					
CPL 02-11-03 Site Specific Targeting 2011 (SST-11) (9/9/11) Due – 11/12/11 Adoption Req.-Yes Intent Req.- Yes	11/16/11	Y	N		11/16/11
CPL 02-03-003 Whistleblower Investigations Manual (9/20/11) Due – 11/21/11 Adoption Req. – Yes Intent Req. - Yes					

D. Variances

There were no variance requests received or processed during FY 2011.

E. Public Employee Program

100% of all inspections conducted by PEOSH occurred in the Public Sector.

F. Discrimination Program – Special Study

PEOSH has two investigators who are trained to conduct discrimination complaints. During 2011, PEOSH received a total of twelve discrimination complaints and all 12 case files were reviewed on-site. Four of these were prima-facie cases that were investigated -- though none were completed within 90 days – and all four cases were found to be not meritorious. Three of these non-merit cases were forwarded to the Office of Administrative Law on appeal and are pending final determination. Eight other cases were administratively closed.

The discrepancy in the numbers reviewed (12) vs. numbers reported (3) in the SAMM report is a result of three of the twelve complaints being classified as non-merit cases and forwarded to the Office of Administrative Law on appeal. The remaining cases were administratively closed due to reasons such as no jurisdiction, or because through the screening process it was determined that no prima facie allegation existed or the case was filed incorrectly.

A comprehensive review of the discrimination program was conducted during the FY 2009 EFAME review and all recommendations were adequately addressed during FY 2010. A follow-up review was conducted to evaluate PEOSH's performance during FY 2011. Overall it was determined that the NJ PEOSH Whistleblower Program is in conformance with guidelines and meets the objectives of the guidelines effectively.

Specific findings from the follow-up review of the discrimination program are as follows:

Investigative Case File Reviews

- Determinations are reached based on evidence developed and maintained in each of the four case files examined
- Policies and procedures in effect though specific to NJ State statutes and regulations are as effective as those of OSHA and this is reflected in the case files.
- Complainants in each case were advised of each determination reached and pertinent appeal rights.
- None of the four cases reviewed were found to have merit and were therefore not suitable for litigation or settlement

Program Management

- All data entries were made in an accurate and timely manner
- Data management is maintained through IMIS Whistleblower Program and the quality of the data is properly maintained.
- The appeal process in each case is supplied to complainants by letter at the time the determination is reached.
- There were no complaints referred to Federal OSHA during the period reviewed.

Resources

- Two of the PEOSH Personnel were able to attend the most recent Whistleblower Training Conference held in Florida.
- At the present time, funds are available to send additional personnel for Whistleblower Training in Chicago. State personnel presented the idea of conducting investigator training in or near Trenton in order to facilitate the training of additional investigators for Whistleblower Investigations.

G. Complaints About State Program Administration (CASPA's)

There was one CASPA received late in FY 2011 that was investigated during FY 2012. The nature of the allegations has to do with lack of staffing and the return of Federal funding monies in the last fiscal year. Federal OSHA's response is pending.

H. Voluntary Compliance Program

PEOSH does not have a Voluntary Compliance Program.

I. Public Sector On-site Consultation Program (MARC report 11/04/11)

During FY 2011 a portion of PEOSH's public sector safety consultant resources were reassigned to enforcement in an effort to sustain credible enforcement after losing compliance staff. During FY 2012 it is anticipated that PEOSH enforcement will be able to increase staffing. In this event, it is anticipated that PEOSH will be able to begin the process of restoring its public sector safety consultation program to full staffing levels.

PEOSH's public sector consultation program conducted a total of 99 consultation visits during FY 11. Included in this total are 69 safety and health initial consultations, 27 follow-up visits, and 3 training and assistance visits. The total of 99 visits was 85 % of the total projected goal of 116.

A total of nine (9) Consultation case files were reviewed during this review: 5 Safety and 4 Health. Documentation in all case files was adequate. Most consultation visits were performed in a timely manner (1 of the visits was found to be initiated two months after the initial request). Written reports were sent to employers after review by the supervisor and abatement was verified by letter from the employer.

The following MARC statistics are provided:

MARC 1: Percent of initial visits in high-hazard establishments – PEOSH conducted 59.42% of its initial visits in high hazard establishments, a slight increase from FY 2010 indicator of 54.67 but still less than the reference point of not less than 90%. It is understood that public sector consultation requests are frequently from agencies that are not considered high hazard.

MARC 2: Percent of initial visits in smaller business – 94.20% of initial visits were conducted in establishments with less than or equal to 250 employees; 85.51% in establishments with less than or equal to 500 employees. The reference point is no less than 90%.

The percentage essentially remained the same from FY 2010 for establishments with less than or equal to 250 employees and decreased slightly for establishments with less than or equal to 500 employees.

MARC 3: Percent of visits where consultants conferred with employees - PEOSH conferred with employees in 100% (15 out of 15 initial visits [FY 2010 the percentage was 100%]). FY 2011 percentage for follow-up visits was 100% (15 out of 15 visits) and 100 % (1 out of 1) training and assistance visits. Reference point is 100%.

MARC 4a: Percent of Serious Hazards Verified Corrected in a Timely Manner.

88.31% of serious hazards were verified abated in a timely manner compared to 80.97% in FY 2010. Reference standard is 100%

MARC 4b: Percent of Serious Hazards not verified corrected in a timely manner

11.69% of serious hazards were not verified corrected in a timely manner.

MARC 4c: Percent of Serious Hazards referred to enforcement.

No serious hazards were referred to enforcement during FY 2011 as compared to 0.44% referred in FY 2010

MARC 4d: Percent of Serious Hazards verified corrected (in original time or on site)

The percent of serious hazards verified corrected in original time or on site is 43.72% an increase from 37.61 in FY 2010. The reference standard is 65%.

MARC 5: Number of uncorrected serious hazards past 90 days –

There were no serious hazards uncorrected as of the end of FY 2011.

J. Private Sector 23(g) On-site Consultation Programs

N/A

K. Program Administration

Staffing:

Staffing continues to be a concern with multiple vacancies within PEOSH and a continuing hiring freeze. Enforcement staffing continues to fall short on the safety side with 12 safety compliance officers compared to the 15 that were allocated, and on the health side with five industrial hygienists compared to the seven that were allocated. PEOSH, however, is making credible efforts to effectively manage staffing. Part of these efforts include plans to hire two more safety compliance officers, and one more staff member to assist with health enforcement bringing the total to 14 and six respectively. In recent years, PEOSH has had to return federal funds as a result of significant staff cuts. This did not occur in FY 2011. Also, in recent years the PEOSH program was affected by furloughs. In FY 2011 no PEOSH employees were furloughed.

State Internal Evaluation Program: The New Jersey State Internal Evaluation Program (SIEP) consists of field audits conducted to evaluate CSHO performance to key job elements. This program was initiated to determine if program operations conform to policies and procedures established by the State Plan. In an effort to foster improvement in PEOSH's SIEP Region II OSHA plans to work with PEOSH to enhance its SIEP plan during FY 2012.

Enforcement Staff Training:

For a number of years, due to a LWD travel policy restricting out of state travel, PEOSH safety enforcement training has been lacking. This policy has been changed, allowing enforcement personnel to travel to the OSHA Training Institute for safety and health technical training. In addition, PEOSH took advantage of a number of local training opportunities. A detailed accounting of training provided of PEOSH staff is as follows:

- On October 26, 2010, all PEOSH Staff from Enforcement, Training, and Compliance Assistance attended training on OSHA's new Cranes and Derricks in Construction Standard at the Operating Engineers Local 825 Training Center in Dayton, NJ. The training consisted of a classroom session detailing changes from the previous standard, and hands on instruction with different mobile cranes at the facility.
- On November 30, 2010, the Compliance Assistance Specialist attended the HAZWOPER Refresher class at the Atlantic OSHA Training Center at UMDNJ in Piscataway, NJ.
- On January 4, 2011, a meeting was held for all PEOSH staff at the Trenton New Jersey Department of Labor and Workforce Development (NJDLWD). Representatives from the USDOL-OSHA attended the meeting to explain the proper documentation which should be included in all Enforcement case files as well as Consultation case files. Other topics discussed included the use of OSHA forms for timekeeping and to record time spent performing interventions.
- On January 24, 2011, one employee from PEOSH Training/Consultation attended the OSHA 0036 OSHApedia webinar. The webinar introduced the OSHApedia website and provided instruction and a demonstration on how to use it.
- On February 28, 2011, one employee from PEOSH Training/Consultation attended the OSHA 0037 Fall Protection in Residential Construction webinar. This webinar focused on the change in policy for fall protection in residential construction.
- On March 10, 2011 one DHSS employee completed the OSHA Course 7505-Accident Investigation.
- On March 16, 2011, two employees from PEOSH Training/Consultation attended OSHA 7005 Public Warehousing and Storage training at Wheaton Industries in Millville, NJ. The training was sponsored by the NJ State Industrial Safety Committee and administered through the Atlantic OSHA Training Center.
- On March 21, 2011, one employee from PEOSH Training/Consultation attended the OSHA 0038 OSHA's Top Ten Violations webinar. This webinar provided statistical data on the most common OSHA violations in general industry, construction, and some of the National Emphasis Programs.
- On March 31, 2011, one DHSS employee completed the OSHA Course 1230- Accident Investigation, conducted at the OSHA Training Institute.

- On April 15, 2011, one DHSS employee completed the OSHA Course-Initial Compliance, conducted at the OSHA Training Institute.
- On April 22, 2011, two DHSS employees completed the OSHA Course 2450-Evaluation of Safety and Health Management Systems conducted at the OSHA Training Institute.
- On April 26, 2011, one DHSS employee completed the OSHA Course 2450-Evaluation of Safety and Health Management Systems.
- From May 2 to 4, 2011, a PEOSH Trainer attended the OSHA 503 General Industry Trainer Refresher class at the ECRI Institute located in Plymouth Meeting, PA. Our PEOSH Trainer completed the training and received their authorization to maintain general industry trainer status.
- On May 17, 2011, three employees from the Occupational Safety Training Unit attended OSHA 7410 Excavation Awareness Training. This training was sponsored by the NJ Industrial Safety Committee and held at the Operating Engineers Local 825 Training Center. The class focused on excavation hazards and control measures, soil analysis techniques, protective system requirements and emergency response. All three Training Unit employees completed the training and received certificates of completion.
- On May 19, 2011, eight DHSS employees attended the OSHA Region II's 2011 CSHO In-Service Training.
- From June 8 to June 10, 2011, one PEOSH employee attended the OSHA 503 General Industry Trainer Recertification Class. The PEOSH employee completed the training and will maintain their OSHA Outreach Trainer Status.
- On June 10, 2011, one DHSS employee completed the OSHA Course 1310-Investigative Interviewing Techniques conducted at the OSHA Training Institute.
- On June 20, 2011, one PEOSH employee participated in an OSHA webinar entitled OSHA 0043 FDA Training for OSHA Compliance Safety and Health Officers. The webinar highlighted potential FDA hazards that OSHA Officers might encounter in inspections of employers in the food industry.
- June 22-24, 2011, one PEOSH employee attended the OSHA 502 Construction Industry Trainer Recertification Class. The PEOSH employee completed the training and will maintain their OSHA Outreach Trainer Status.
- On June 24, 2011, one DHSS employee completed the OSHA Course 2450-Evaluation of Safety and Health Management Systems conducted at the OSHA Training Institute.
- On August 8, 2011, one PEOSH Training Unit employee attended 40 Hour HAZWOPER refresher class at the Atlantic OSHA Training Center at UMDNJ. To participate in the OSHA's emergency response team, PEOSH employees are required to maintain their 40 Hour HAZWOPER certification which requires an annual 8 hour refresher class.

- On August 16 or August 18, 2011, four PEOSH employees from the Training Unit attended Solar Farm Safety Training administered through Rutgers University at their Livingston Campus. The training familiarized Occupational Safety Training staff on how solar energy systems are configured and the unique hazards associated with these systems. With the increase in the use of solar energy, this training will be beneficial once incorporated into the electrical safety training already being presented through the Occupational Safety Training Unit.
- On August 23 and 24, 2011, four PEOSH Training Unit and four DHSS employees attended OSHA 7505 Introduction to Accident Investigation Training administered through the Atlantic OSHA Training Center and held here at the Trenton NJDLWD facility. The training familiarized staff with how to conduct an effective accident investigation. All PEOSH employees completed the training and received certificates.
- From September 13, 2011 to September 15, 2011, a PEOSH Trainer attended OSHA 3010 Excavation, Trenching and Soil Mechanics Class at OSHA's Training Institute in Arlington Heights, IL. The class introduced students to soil mechanics, sloping / shoring of excavations, soil typing, and other related safety topics. This class will be a valuable resource in providing our Excavation Awareness and OSHA 10 Hour Construction Classes. Our PEOSH Trainer finished all elements of the training and received a certificate of completion.
- From September 14, 2011 to September 16, 2011, a PEOSH Trainer and the Compliance Assistance Specialist attended OSHA 3110 Fall Arrest Systems Training at UMDNJ's Atlantic OSHA Training Center in Piscataway, NJ. This class provided participants with an overview of state-of-the-art technology for fall protection and current OSHA requirements. This class will benefit our trainers with teaching several topics including slips / trips/ falls, walking and working surfaces, and OSHA 10 Hour Construction Classes. Both PEOSH Employees completed the training.
- From September 27 to 29, 2011, one PEOSH employee attended OSHA 1330 Consultation Systems Assessment Training administered by the OSHA Training Institute in Santa Ana, CA. The course focused on the proper procedures for completing consultation forms with a particular emphasis on the OSHA Consultation Form 33. The NJDLWD employee completed the training and received a certificate.
- On September 26, 2011, one PEOSH Training Unit employee attended 40 Hour HAZWOPER refresher class at the Atlantic OSHA Training Center at UMDNJ. To participate in the OSHA's emergency response team, PEOSH employees are required to maintain their 40 Hour HAZWOPER certification which requires an annual 8 hour refresher class.

V. Assessment of State Progress in Achieving Annual Performance Goals

This section focuses on the PEOSH's progress toward meetings its targeted performance goals as outlined in the Program's FY 2011 Annual Performance Plan.

PEOSH Strategic Goal #1

Improve workplace safety and health for all public employees as evidenced by fewer hazards, reduced exposures and fewer injuries, illnesses, and fatalities.

Performance Goal 1.1

*Decrease work-related injuries and illnesses in state, county and/or local agencies **State Support Activities for Transportation (NAICS 488)** in the specific NAICS segments by an additional 1% (5 % total by 2013)*

Entities targeted under this emphasis area include:

- New Jersey Turnpike Authority;
- South Jersey Transportation Authority; and
- South Jersey Port Corporation.

Rather than a decrease of 2% between 2008 and 2011, the total recordable case rate actually increased to 12.3 during 2011, a 13% increase over 2009's rate and a 29% increase over the 2008 baseline rate. This increase may be due to an increase in road construction work that was conducted as a result of ARRA funding. The overall injury and illness rates since 2005 are still trending downward, declining approximately 29% during the period 2005-2011.

PEOSH did not meet most of its performance goals with respect to activity measures (see table below) established under its 2011 Annual Performance Plan. The increasing trend in injury and illness rates between 2008 and 2011 is a concern that needs to be addressed through continued and increased enforcement and outreach activities.

DEPARTMENT OF TRANSPORTATION – NAICS 488

Year	TCIR	% Change from Baseline (2008)	% Change from 2005
2005	19.5	N/A	N/A
2006	20.9	N/A	Increase 7.2%
2007	17.4	N/A	Decrease 10.8%
2008 Baseline	11.5	N/A	Decrease 41.0%
2009	12.3	7% Increase	Decrease 36.9%
2011	13.9	20.9% Increase	Decrease 29%

FY 2011 ACTUAL ACTIVITIES (SOAR) vs. FY 2011 APP PROJECTIONS NAICS 488
(Source: FY 2011 APP and FY 2011 SOAR))

Activity Measure	FY 2011 Projected	FY 2011 Actual
Decrease injuries and illnesses in state, county and/or local agencies in NAICS code 488 by 5% by 2013 as follows (1% per year) from 2008 baseline:	11.27 TCIR 2011	13.9 TCIR 2011 – Or 20.9% Increase from baseline - Goal Not Met
# of Inspections Conducted	11 Total for targeted NAICS	8 Inspections - Goal Not Met
# of Consultation Visits Conducted	2 Total for NAICS 488 and NAICS 623	0 Goal Not Met
# of Outreach/Training and Education Seminars conducted	2 Total	2 Total Goal Met
Outreach materials distributed at all above	Outreach materials distributed at all above	Outreach Materials were distributed– Goal Met
Promote alliances/partnerships with Stake holders	Promote alliances/partnerships with Stake holders	No partnerships or alliances were developed – Goal Not Met

Performance Goal 1.2

*Decrease work-related injuries and illnesses in **State Nursing and Residential Care Facilities (NAICS 623)** by an additional 1% (5 % total by 2013).*

PEOSH met or exceeded all but one of its performance goals with respect to activity measures (see table below) established under its 2011 Annual Performance Plan. The injury and illness rates were reduced from the baseline of 15.5 to 13 in 2011; a decrease of 16%, exceeding the 5 year goal.

NURSING AND RESIDENTIAL CARE – NAICS 623

Year	TCIR	% Change from Baseline (2008)	% Change from 2005
2005	15.1	N/A	N/A
2006	17.6	N/A	Increase 16.6%
2007	16.7	N/A	Increase 10.6%
2008 Baseline	15.5	N/A	Increase 2.6%
2009	16.6	7% Increase	Increase 9.9%
2011	13.0		Decrease 16%

FY 2011 ACTUAL ACTIVITIES (SOAR) vs. FY 2011 APP PROJECTIONS **NAICS 623**

(Source: FY 2011 APP and FY 2011 SOAR))

Activity Measure	FY 2011 Projected	FY 2011 Actual
Decrease injuries and illnesses in state, county and/or local agencies in NAICS code 623 by 5% by 2013 as follows (1% per year) from 2008 baseline:	15.2 TCIR 2011	13.0 TCIR 2011 - Goal Exceeded
# of Inspections Conducted	11 Total for NAICS 488 and NAICS 623	18 Inspections conducted - Goal Exceeded
# of Consultation Visits Conducted	2 Total for NAICS 488 and NAICS 623	1 – NAICS 623 - Goal Not Met
# of Outreach/Training and Education Seminars conducted	2 Total for NAICS 488 and NAICS 623	15 for NAICS 623; 20 Total for NAICS 488 and NAICS 623 – Goal Exceeded
Outreach materials distributed at all above	Outreach materials distributed at all above	Goal Met
Promote alliances/partnerships with Stake holders	Promote alliances/partnerships with Stake holders	Goal Met

Performance Goal 1.3

*Decrease non-fatal occupational injury and illness incident rates in state, county and/or local **Fire Protection (NAICS 92216)** agencies in the specific NAICS segments by an additional 1% (5 % total by 2013).*

PEOSH met or exceeded all but one of its performance goals with respect to activity measures (see table below) established under its 2011 Annual Performance Plan for this sector. Notwithstanding the above, the injury and illness rates continue to fluctuate above baseline rates.

The baseline used is the 2008 NAICS 92216 incidence rate of nonfatal occupational injuries and illnesses which is 11.7 total recordable cases (source is NJLWD, Division of Program Planning, Analysis and Evaluation. A five percent decrease from the baseline of 11.7 will result in a rate of 11.1 total recordable cases. The latest Division of Program Planning, Analysis and Evaluation (A&E) data is for the year 2010. The 2010 total recordable cases for Fire Protection increased from the baseline of 11.7 to 12.8. The overall trend for NAICS 92216 is down 7% however, from the 2005 rate of 13.8 National Institute of Occupational Safety and Health (NIOSH) statistics for the fire service identify cardiac arrest and motor vehicle accidents as the

predominant cause of firefighter injuries/illnesses and fatalities which are largely beyond the control of NJ PEOSH's enforcement capabilities.

FIRE PROTECTION – NAICS 92216

Year	TCIR	% Change from Baseline (2008)	% Change from 2005
2005	13.8	N/A	N/A
2006	11.8	N/A	Decrease 14.5%
2007	14.0	N/A	Increase 1.4 %
2008 Baseline	11.7	N/A	Decrease 15.2%
2009	12.7	8 % Increase	Decrease 8.0 %
2011	12.8	9.4% Increase	Decrease 7.2%

FY 2011 ACTUAL ACTIVITIES (SOAR) VS. FY 2011 APP PROJECTIONS **NAICS 92216**

(Source: FY 2011 APP and FY 2011 SOAR))

Activity Measure	FY 2011 Projected	FY 2011 Actual
Decrease injuries and illnesses in state, county and/or local agencies in NAICS code 92216 by 5% by 2013 as follows (1% per year) from 2008 baseline:	11.5 TCIR 2010	12.8 TCIR 2009 – 9.4% Increase from baseline - Goal Not Met
# of Inspections Conducted	67 Total for NAICS 92216 and NAICS 92212	394 Total for NAICS 92216 and NAICS 92212- Goal Exceeded
# of Consultation Visits Conducted	8 Total for NAICS 92216 and NAICS 92212	30 NAICS 92216 - Goal Exceeded
# of Outreach/Training and Education Seminars conducted	10 Total for NAICS 92216 and NAICS 92212	17 NAICS 92216 and NAICS 92212 -- Goal Exceeded
Outreach materials distributed at all above	Outreach materials distributed at all above	Outreach Materials were distributed – Goal Met
Promote alliances/partnerships with Stake holders	Promote alliances/partnerships with Stake holders	0 – NAICS 92216 – Goal Not Met

Performance Goal 1.4 – Local Police Protection (NAICS 92212)

Decrease non-fatal occupational injury and illness incident rates in state, county and/or local Police Protection (NAICS 92212) agencies in the specific NAICS segments by an additional 1% (5 % total by 2013).

With the exception of outreach/training sessions conducted and partnerships and alliances promoted, this goal was met. The baseline to be used is the 2008 NAICS 92212 incidence rate of nonfatal occupational injuries and illnesses of 11.4 total recordable cases (Source the NJLWD, Division of Program Planning, Analysis and Evaluation). A five percent decrease from the baseline of 11.4 will result in a rate of 10.8 total recordable cases. The 2010 total recordable cases for local police protection decreased from the baseline from 11.7 to 11.0, meeting the goal.

LOCAL POLICE – NAICS 92212

Year	TCIR	% Change from Baseline (2008)	% Change from 2005
2005	12.3	N/A	N/A
2006	11.8	N/A	Decrease 4.1%
2007	12.5	N/A	Increase 1.6%
2008 Baseline	11.4	N/A	Decrease 7.3%
2009	10.4	Decrease 9%	Decrease 15.4%
2010	11.0	Decrease 3.5%	Decrease 10.6%

FY 2011 ACTUAL ACTIVITIES (SOAR) VS. FY 2011 APP PROJECTIONS NAICS 92212

(Source: FY 2011 APP and FY 2011 SOAR))

Activity Measure	FY 2011 Projected	FY 2011 Actual
Decrease injuries and illnesses in state, county and/or local agencies in NAICS code 92212 by 5% by 2013 as follows (1% per year) from 2008 baseline:	11.2 TCIR 2010	11.0 TCIR Decrease of 3.5% from baseline - Goal Met
# of Inspections Conducted	134 Total for NAICS 92216 and NAICS 92212	154 for NAICS 92212, 92216, and NAICS 92212- Goal Exceeded
# of Consultation Visits Conducted	8 Total	8 – - Goal Met
# of Outreach/Training and Education Seminars conducted	10 Total for NAICS 92216 and NAICS 92212	4 Total - Goal Not Met

Outreach materials distributed at all above	Outreach materials distributed at all above	Goal Met
Promote alliances/partnerships with Stake holders	Promote alliances/partnerships with Stake holders	0 – Goal Not Met

The following is a graphical representation of PEOSH’s progress toward reducing the Non-Fatal Occupational Injury and Illness Incident Rates for the Industry Sectors Covered by the PEOSH 5-Year Strategic Plan Goal # 1



Strategic Goal #2

To promote safety and health values in New Jersey’s public sector workplaces.

Performance Goal 2.1 – Foster the development of effective health and safety management systems in 100% State Agencies by offering and delivering training programs on Safety and Health Management Systems and development of Labor-Management Safety and Health Committees to 20 % of the agencies each year.

During FY 2011 progress on this goal has not occurred due to the lack of available staff.

Relating to the NJLWD safety and health management system, during this fiscal year the PEOSH Compliance Assistance Specialist participated in all NJLWD safety committee meetings. These meetings are held once a month and rotate to a different NJLWD location each month. The advantage of holding these meetings at the different locations is the participation of local union representatives and visibility of the joint labor management safety committee to local office NJLWD employees.

NJPEOSH has requested that this goal be removed from the strategic plan due to lack of resources. OSHA is currently considering this request.

FY 2011 ACTUAL ACTIVITIES (SOAR) vs. FY 2011 APP PROJECTIONS

(Source: FY 2011 APP and FY 2011 SOAR)

Activity Measure	FY 2011 Projected	FY 2011 Actual
Training Programs for SHIMS	6	0 - Goal Not Met
Educational Materials distributed at each visit	All	0 - Goal Not Met
# of Part/Alliances established	5	0 - Goal Not Met
# of Consultation Visits	2	0 - Goal Not Met

Performance Goal 2.2 – *The NJDHSS PEOSH Program will conduct programmed inspections, and/or consultation visits, and/or provide outreach and training to 20% (110) of municipal departments of public works by the end of FY2013 (4% or 22 per year).*

During FY 2011, NJDHSS PEOSH Program conducted 26 programmed inspections and 5 consultations at municipal departments of public works. At each programmed inspection and consultation, education/outreach materials were provided. In addition 1 training program was conducted at a municipal department of public works. The annual goal of 22 programmed inspections was exceeded and the goal of 5 consultations was met. The goal of five outreach and training sessions was not met.

FY 2011 ACTUAL ACTIVITIES (SOAR) vs. FY 2011 APP PROJECTIONS

(Source: FY 2011 APP and FY 2011 SOAR)

Activity Measure	FY 2011 Projected	FY 2011 Actual
Programmed Inspections	22	26 - Goal Exceeded
# of Consultation Visits	5	5 - Goal Met
# of Outreach/Training Seminars Conducted	5	1 - Goal Not Met

Performance Goal 2.3: Achieve a customer service rating of “highly effective” (score 7 or higher, on a scale of 1 thru 10) on a customer satisfaction survey from 90% of public employers subject to an intervention.

During FY2011, public employers who received consultation visits rate their intervention; (a highly effective score is 7 or higher, on scale of 1 through 10 on the customer satisfaction survey). 100 % of public employers responding to the PEOSH Consultation survey rated the intervention as highly effective which exceeds the goal of 90% customer satisfaction.

FY 2011 ACTUAL ACTIVITIES (SOAR) VS. FY 2011 APP PROJECTIONS

(Source: FY 2011 APP and FY 2011 SOAR)

Activity Measure	FY 2011 Projected	FY 2011 Actual
# of initial Consultation Visits	116	88 - Goal Not Met
# of Survey Distributed/Received	116	26 – Goal Not Met
% Responses rated highly effective	90%	100% Goal Exceeded

Performance Goal 2.4: Achieve a customer service rating of “highly effective” (score of 4 or higher, on a scale of 1 thru 5) on a customer satisfaction survey which rates the quality of public sector compliance assistance interventions (e.g., outreach, seminars, mass mailings, hazard bulletins, newsletters, etc.) conducted/distributed by PEOSH from 90% of public employers subject to a compliance assistance intervention.

For NJLWD PEOSH Safety Trainers, a new questionnaire was developed with a scale of 1 to 10. All employers surveyed for the education/training seminars below rated the experience as 7 or higher which according to the scale in the questionnaire was “very good” to “excellent”.

FY 2011 ACTUAL ACTIVITIES (SOAR) VS. FY 2011 APP PROJECTIONS

(Source: FY 2011 APP and FY 2011 SOAR)

Activity Measure	FY 2011 Projected	FY 2011 Actual
# of Education/Training Seminars Conducted	175	167 – Goal Not Met
# of Compliance Assistance Interventions	5	0 - Goal Not Met
% Rated Highly Effective	90%	100%

Performance Goal 2.5: *Achieve employee involvement in 100% of PEOSH interventions (e.g., inspections, consultations, etc.)*

During FY2011 PEOSH planned to have 100% of PEOSH interventions (e.g., inspections, consultations, etc.) include employee involvement. Onsite review of a sample of enforcement and consultation case files revealed that all files contained adequate documentation of the level of employee involvement, and those employees and/or their representatives were afforded the opportunity to participate in all aspects of the interventions.

In addition, PEOSH is involved in other activities that include involvement of employees or their representatives including: PEOSH Advisory Board Subcommittee on Workplace Violence in Schools; American Lung Association, Pediatric/Adult Asthma Coalition (IAQ related); and the Legionella Task Force.

Performance Goal 2.6: *Bring 4 new public sector work sites into the Safety and Health Achievement Recognition Program (SHARP) every year for the 5 year Strategic Plan (20 new sites by 2013). No new sites were brought into SHARP during FY11. This goal was not met; however, five SHARP consultations were completed in FY 2011, all of which are currently under review.*

FY 2011 ACTUAL ACTIVITIES (SOAR) VS. FY 2011 APP PROJECTIONS

(Source: FY 2011 APP and FY 2011 SOAR)

Activity Measure	FY 2011 Projected	FY 2011 Actual
# of Safety and Health Achievement Recognitions awarded	4	0 - Goal Not Met

Strategic Goal 3

Performance Goal 3.1: *Initiate inspections of fatalities and catastrophes within one (1) day of notification for 95% of occurrences to prevent further injuries or deaths.*

There were 7 fatalities in FFY 2011. All investigations were initiated within one day of notification exceeding the Strategic Goal of 95%.

FY 2011 ACTUAL ACTIVITIES (SOAR) VS. FY 2011 APP PROJECTIONS

(Source: FY 2011 APP and FY 2011 SOAR)

Activity Measure	FY 2011 Projected	FY 2011 Actual
Number of fatalities investigated within one day of notification	95%	100% (7 out of 7) - Goal Met

Performance Goal 3.2A: Initiate 95% of safety complaint inspections within five (5) working days of notification. This goal was exceeded as 100% of complaints were initiated within five working days of complaint receipt totaling 96 complaints during FY2011.

For FFY 2011, the NJDLWD received 51 complaints. All resulting inspections were initiated within 5 days exceeding the goal.

FY 2011 ACTUAL ACTIVITIES (SOAR) vs. FY 2011 APP PROJECTIONS

(Source: FY 2011 APP and FY 2011 SOAR)

Activity Measure	FY 2011 Projected	FY 2011 Actual
Number of safety complaints initiated within five (5) working days of notification	95%	100% (51 out of 51) - Goal Exceeded

Performance Goal 3.2B: Initiate 95% of non-IAQ/non-sanitation health complaint inspections within 5 working days of notification.

For FFY2011 NJDHSS PEOSH Program received 38 complaints. Twenty-six (36) inspections were initiated within five days (average 3.1 days, range 2-6days). The NJDHSS PEOSH Program received 120 IAQ and sanitation complaints in FFY2011. The goal to initiate 95% of non-IAQ/sanitation complaints was met. 95% (36/38) of the non-IAQ, non-sanitation complaints were initiated within five days, meeting the goal.

FY 2011 ACTUAL ACTIVITIES (SOAR) vs. FY 2011 APP PROJECTIONS

(Source: FY 2011 APP and FY 2011 SOAR)

Activity Measure	FY 2011 Projected	FY 2011 Actual
# of health Complaints received	140	120
# of Non-IAQ, sanitation health complaints initiated within 5 working days	38	36 Out of 38 – 95% Goal Met

Appendix A
FY 2011 New Jersey State Plan (PEOSH) FAME Report
Findings and Recommendations

Rec #	Findings	Recommendations	FY 10 #
11-1	<p>Complaint Processing Timeliness issue:</p> <ul style="list-style-type: none"> Excessive time period between receipt of complaint to initiation of IAQ inspections (120+ days) – 6 of the 6 IAQ Health cases reviewed; Excessive time period between the closing conference and sending the letter to the complainant advising them of the complaint inspection findings (50+ days) - 6 of the 18 Health case files reviewed. 	<p>Recommendation – Ensure timely response to complaints and complainants in accordance with PEOSH’s Field Operations Manual (FOM)</p> <p>PEOSH DHSS should continue to implement established procedures to reduce their current backlog of IAQ and sanitation complaints</p>	
11-2	<p>Complaint Processing Issue</p> <ul style="list-style-type: none"> Letters to the complainants were missing in 7 of the 20 safety case files reviewed. Documentation in the case files referred to letters to the complainants but no letters were in the case files. 	<p>Recommendation – Ensure case files include all required forms and letters related to complaints.</p>	
11-3	<p>Forms Processing Issue</p> <ul style="list-style-type: none"> Case files did not contain an OSHA-1 for Follow-Up inspections in 10 of the 35 Safety case files reviewed. This was not an issue with the Health files reviewed. 	<p>Recommendation – Ensure case files include all required forms related to follow-up inspections.</p>	
11-4	<p>Citations/Penalty –</p> <p>Case file critical information and documentation are missing from almost all safety cases and up to half of health cases that are needed to establish prima facie violations of OSHA standards.</p> <ul style="list-style-type: none"> No location specified on the OSHA 1b; (7/18 Health cases; 26/26 Safety Cases) No “on or about date” on the OSHA 1b ; (7/18 Health cases; 26/26 Safety Cases) No employee exposure data (Names, Addresses, and Phone Number with the total number exposed and duration of exposure (i.e. exposed employees table) on the OSHA 1b (8/18 Health cases; 23/26 Safety Cases) No description of the hazard and how employees were exposed to this specific hazard on the OSHA 1b; (6/18 Health cases; 26/26 Safety Cases) 	<p>Recommendation –</p> <p>Document case files in accordance with PEOSH’s Field Operations Manual (FOM).</p>	(09-8, 09-10)

	<ul style="list-style-type: none"> Specified injury/illness does not equate with the Gravity/or is not consistent with the hazard: Health injury illness utilized is not based on the worst case exposure/ or otherwise in compliance with the Gravity based calculations found within FOM; (4/18 Health cases) <p>OSHA 170 was not completed in sufficient detail in 2 of the 3 fatality case files reviewed. The narrative section of the OSHA-170 was blank and/or lacked detail as to a cause of the fatality</p>		
11-5	<p>Excessive Abatement Dates – At least one violation per case file had an excessive abatement time period specified. Some examples included:</p> <ul style="list-style-type: none"> 30 days abatement for respirators being removed from service; 60 days abatement for an exit that was blocked by a fire hose; 60 days abatement for an electrical panel to be labeled. <p>This occurred in 5 of the 18 Health case files reviewed and 14 of the 35 Safety case files reviewed.</p>	Recommendation – Ensure appropriate time periods are established for all abatement	(09-11)
11-6	<p>Inadequate Abatement Documentation</p> <ul style="list-style-type: none"> No specifics documented as to how violations were abated in 7 of the 35 safety case files reviewed. <p>Abatement documentation in the health files was adequate.</p>	Recommendation – Ensure case files include all required forms on abatement documentation	(09-11)

Appendix B

Status of State Actions in Response to FY 2010 EFAME Follow-Up Recommendations

**There were no follow-up recommendations included in the 2010
New Jersey EFAME Report.**

Appendix C

New Jersey Public Sector Only State Plan FY 2011 Enforcement Activity

	NJ*	State Plan Total	Federal OSHA
Total Inspections	1,279	52,056	36,109
Safety	1,071	40,681	29,671
% Safety	84%	78%	82%
Health	208	11,375	6,438
% Health	16%	22%	18%
Construction	22	20,674	20,111
% Construction	2%	40%	56%
Public Sector	1,279	7,682	N/A
% Public Sector	100%	15%	N/A
Programmed	574	29,985	20,908
% Programmed	45%	58%	58%
Complaint	132	8,876	7,523
% Complaint	10%	17%	21%
Accident	7	2,932	762
Insp w/ Viols Cited	595	31,181	25,796
% Insp w/ Viols Cited (NIC)	47%	60%	71%
% NIC w/ Serious Violations	92%	63.7%	85.9%
Total Violations	3,836	113,579	82,098
Serious	2,535	50,036	59,856
% Serious	66%	44%	73%
Willful	-	295	585
Repeat	1	2,014	3,061
Serious/Willful/Repeat	2,536	52,345	63,502
% S/W/R	66%	46%	77%
Failure to Abate	-	333	268
Other than Serious	1,300	60,896	18,326
% Other	34%	54%	22%
Avg # Violations/ Initial Inspection	6.1	3.4	2.9
Total Penalties	\$ 300	\$ 75,271,600	\$ 181,829,999
Avg Current Penalty / Serious Violation	\$ 0.10	\$ 963.40	\$ 2,132.60
% Penalty Reduced	0.0%	46.6%	43.6%
% Insp w/ Contested Viols	0.0%	14.8%	10.7%
Avg Case Hrs/Insp- Safety	4.5	17.1	19.8
Avg Case Hrs/Insp- Health	-	26.8	33.1
Lapse Days Insp to Citation Issued- Safety	9.8	35.6	43.2
Lapse Days Insp to Citation Issued- Health	42.9	43.6	54.8
Open, Non-Contested Cases w/ Incomplete Abatement >60 days	11	1,387	2,436

*Note: Federal OSHA data does not include OIS data.
The total number of inspections for Federal OSHA is 40,684.*

Source: DOL-OSHA. State Plan & Federal INSP & ENFC Reports, 11.8.2011.

Appendix D

Appendix D - FY 2011 State Activity Mandated Measures (SMM) Report – New Jersey

U. S. D E P A R T M E N T O F L A B O R
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION
STATE ACTIVITY MANDATED MEASURES (SMMs)

NOV 08, 2011
PAGE 1 OF 2

State: NEW JERSEY

RID: 0253400

MEASURE	From: 10/01/2010 To: 09/30/2011		CURRENT FY-TO-DATE	REFERENCE/STANDARD	
1. Average number of days to initiate Complaint Inspections	12789 83.58 153		1061 106.10 10	Negotiated fixed number for each State	
2. Average number of days to initiate Complaint Investigations	0 0		0 0	Negotiated fixed number for each State	
3. Percent of Complaints where Complainants were notified on time	153 100.00 153		10 100.00 10	100%	
4. Percent of Complaints and Referrals responded to within 1 day -ImmDanger	1 100.00 1		0 0 0	100%	
5. Number of Denials where entry not obtained	0		0	0	
6. Percent of S/W/R Violations verified					
Private	0 0		0 0	100%	
Public	2269 84.98 2670		102 31.10 328	100%	
7. Average number of calendar days from Opening Conference to Citation Issue					
Safety	6476 12.77 507		267 13.35 20	2631708 51.9 50662	National Data (1 year)
Health	6667 57.47 116		702 46.80 15	767959 64.8 11844	National Data (1 year)

*NJ FY11

**PRELIMINARY DATA SUBJECT TO ANALYSIS AND REVISION

U. S. D E P A R T M E N T O F L A B O R
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION
STATE ACTIVITY MANDATED MEASURES (SAMMs)

NOV 08, 2011
PAGE 2 OF 2

State: NEW JERSEY

RID: 0253400

MEASURE	From: 10/01/2010		CURRENT		REFERENCE/STANDARD
	To: 09/30/2011		FY-TO-DATE		
8. Percent of Programmed Inspections with S/W/R Violations					
Safety	440	15	90405		
	82.86	88.24	58.5	National Data (3 years)	
	531	17	154606		
Health	53	2	10916		
	80.30	66.67	51.7	National Data (3 years)	
	66	3	21098		
9. Average Violations per Inspection with Vioations					
S/W/R	2536	77	419386		
	4.14	2.20	2.1	National Data (3 years)	
	612	35	198933		
Other	1300	92	236745		
	2.12	2.62	1.2	National Data (3 years)	
	612	35	198933		
10. Average Initial Penalty per Serious Violation (Private Sector Only)	0	0	611105829		
	0	0	1679.6	National Data (3 years)	
			363838		
11. Percent of Total Inspections in Public Sector	1279	59	4467		
	100.00	100.00	100.0	Data for this State (3 years)	
	1279	59	4467		
12. Average lapse time from receipt of Contest to first level decision	0	0	3533348		
	0	0	199.7	National Data (3 years)	
			17693		
13. Percent of 11c Investigations Completed within 90 days	0	0	100%		
	.00				
	3	0			
14. Percent of 11c Complaints that are Meritorious	0	0	1517		
	.00		23.0	National Data (3 years)	
	3	0	6591		
15. Percent of Meritorious 11c Complaints that are Settled	0	0	1327		
			87.5	National Data (3 years)	
	0	0	1517		

*NJ FY11

**PRELIMINARY DATA SUBJECT TO ANALYSIS AND REVISION

Appendix E

State Information Report (SIR)

Not Applicable for NJ PEOSH
public employee only state plan

Appendix F

FY 2011 STATE OSHA ANNUAL REPORT (SOAR)

NEW JERSEY

(Available Separately)

Appendix G

FY 2011 23(g) Consultation Data New Jersey Public Sector Only State Plan

	NJ* Public Sector	Total State Plan Public Sector
Requests	103	1,328
Safety	20	576
Health	83	560
Both	-	192
Backlog	25	123
Safety	8	51
Health	17	58
Both	-	14
Visits	100	1,632
Initial	70	1,336
Training and Assistance	3	175
Follow-up	27	121
Percent of Program Assistance	13%	67%
Percent of Initial Visits with Employee Participation	100%	96%
Employees Trained	142	5,030
Initial	41	2,144
Training and Assistance	101	2,886
Hazards	346	6,063
Imminent Danger	-	3
Serious	249	4,804
Other than Serious	91	1,171
Regulatory	6	85
Referrals to Enforcement	4	6
Workers Removed from Risk	24,816	171,075
Imminent Danger	-	55
Serious	19,117	136,884
Other than Serious	2,970	26,046
Regulatory	2,729	8,090